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## 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED (See Reverse Side for Instructions) (See Reverse Side for Instructions) (See Reverse Side for Instructions) (See Reverse Side for Instructions)

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NAME OF COMMITTEE IN FULL NO, THIS IS A NEW FILING YES, IT AMENDS THE NOTICE FILED ON 5. IS THIS AN AMENDMENT? Amount Date (month, Name of Employer A. FULL NAME, MAILING ADDRESS AND ZIP CODE day, year) Bernard Johnston 13219 62 20 Ave E. Self Occupation Date (month, Amount Name of Employer B. FULL NAME, MAILING ADDRESS AND ZIP CODE day, year) Occupation Date (month, Amount Name of Employer C. FULL NAME, MAILING ADDRESS AND ZIP CODE day, year) Occupation Amount Date (month, D. FULL NAME, MAILING ADDRESS AND ZIP CODE Name of Employer day, year) Occupation Amount Date (month, Name of Employer E. FULL NAME, MAILING ADDRESS AND ZIP CODE day, year) Occupation

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DATE

FEC FORM 6
(Revised 07/2011)

For further information contact:

Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100

SIGNATURE (optional)